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| <b>TRANSMITTAL FORM</b><br><i>(to be used for all correspondence after initial filing)</i> | Application Number   | 10/633,373             |             |
|  | Filing Date          | Jul 31, 2003           |             |
|  | First Named Inventor | Son, Keith             |             |
|  | Art Unit             | 2186                   |             |
|  | Examiner Name        | NYA                    |             |
| Total Number of Pages in This Submission   | 4                    | Attorney Docket Number | 103.1077.01 |

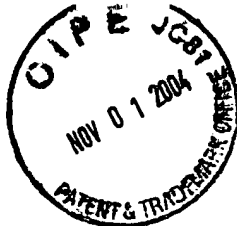
| ENCLOSURES (check all that apply)  |   |   |
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| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment / Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input checked="" type="checkbox"/> <u>Drawing(s) - 2 sheets</u><br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Formal Drawing Transmittal Letter<br>Return Postcard |
| <b>Remarks</b>   |   |   |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |                      |                 |
|--|----------------------|-----------------|
| Firm or Individual name                    | Steven A. Swernofsky | Reg. No. 33,040 |
| Signature                                  |                      |                 |
| Date                                       | 10-28-2004           |                 |

| CERTIFICATE OF TRANSMISSION/MAILING   |               |      |            |
|---|---------------|------|------------|
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| Type or printed name  | Dr. DE STOLLE |      |            |
| Signature   |               | Date | 10/28/2004 |

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22883

Attorney Docket 103.1077.01

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Son

Art Unit: 2186

Serial No. 10/633,373

Examiner: NYA

Filed: 7/31/2003

For: Fiber Channel Adaptor for Serial  
or Parallel ATA Disks

CERTIFICATE OF MAILING

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**TRANSMITTAL OF FORMAL DRAWINGS**

Honorable Commissioner  
for Patents  
Alexandria, VA 22313-1450

Dear Sir:

With respect to the above-identified patent application, enclosed herewith for filing are two (2) sheets of formal drawings.

Respectfully submitted,

Dated: 10-28-2004

[Signature]  
Steven A. Swernofsky  
Reg. No. 33,040

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